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APPLICANTS

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** CONTINUING DATA *****
none *MLH*

** FOREIGN APPLICATIONS *****
none *MLH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY TN | SHEETS DRAWING 3 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | | | | |
| Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div> <i>MLH</i> Examiner's Signature </div> <div> <i>mb</i> Initials </div> </div> | | | | |

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TITLE
 Alternative alternating current power supply

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